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ABSTRACT

Intended to help parents of handicapped children when they meet in partnership with public school staff to discuss their child's educational needs, the handbook presents an overview of federal and Maryland state legislation regarding children with handicaps and summarizes the special education process. The initial section, on building a partnership, explains the scope of relevant legislation, provides a rationale for parent participation, and describes ways in which parents can become involved (as home teachers, information specialists, case managers, and advocates). Section II, on the special education process, discusses what parents should know about evaluation, the individualized education program (IEP), placement, the instructional program, and IEP review and reevaluation. Nearly half the document is made up of appended material, including a parents' educational dictionary and a list of state and national resources for parents. A sample IEP is included. (CL)

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Preface

One of the most important rights that parents of handicapped children have is the right to be involved with the public schools in making education decisions about their children. This right is protected in both federal and Maryland law.

This handbook was prepared to assist parents of handicapped children when they meet in partnership with public school staff to discuss their child's educational needs. The handbook reviews some of the more important aspects of federal and state law and describes the roles that parents can take when they meet with public school personnel. The handbook also reviews the special education process, from the child's initial evaluation, development of the Individualized Education Program (IEP) and placement, through the child's reevaluation. Finally, the handbook contains a list of definitions for words commonly used by educators and a list of agencies parents may wish to contact for further information and assistance.

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Before You Begin . . .

Key Terms (more definitions in Appendix A)

P.L. 94-142 – A law passed by Congress in 1975 which guarantees the right to a free, appropriate public education for all handicapped children.

Bylaw 13A.05.01 – Maryland's special education bylaw, which insures the provision of free and appropriate public education programs and related services for all handicapped children in Maryland (COMAR 13A.05.01).

Special Education – Instruction provided at no cost to parents, specially designed to meet the unique needs of a handicapped child.

Handicapped Children – Includes those children (birth through 20) who have been determined through appropriate assessment as having temporary or long term special education needs arising from cognitive, emotional or physical factors, or any combination of these.

IEP – Individualized Education Program, required by Public Law 94-142 and Maryland Bylaw 13A.05.01, which describes the special education needs of the child and the services to be provided to meet those needs.

I. Building a Partnership

What the Laws Mean . . .

Federal and State Laws

In 1975 Congress passed legislation for handicapped children because parents and parent groups *strongly supported* and *initiated* efforts to improve the availability and quality of schooling for their handicapped children. Today, over four million children benefit from that law. In 1978 the Maryland Special Education Bylaw (13A.05.01) was passed which enhanced existing state and federal laws. It describes how the educational laws of Maryland will be implemented.

- In Maryland, public schools must provide education for all handicapped children ages 0 through 20.
- Public schools provide education to handicapped children at no cost to families.
- Public schools provide education appropriate to the needs of the individual child.
- Public schools inform parents of their right to participate in making decisions and in developing the educational program for their handicapped child.
- Parents have the right to have their child's educational needs met by the public schools.
- Parents will be asked to discuss their child's education with the school and can request a due process hearing if they feel the child's current education needs are not being met by the public school.

"Good news for the handicapped"

Why Parents Need to Participate

One of the most important features of special education programs is parent participation. This booklet is intended to help parents know what they need to know in order to take an active part in their child's education.

- Parents are their child's first teachers and they know more about their child than anyone else.
- Parents often have questions, concerns, suggestions, and years of experience with the child to share with educators.
- When parents learn more about their child and the kinds of help the child will need, they can be better decision-makers now and as the child comes to the end of his school years.
- Educators can share information about teaching and know more about the child's educational strengths and needs. This information can help parents plan for the future.
- The child benefits most when parents and educators work together.

"Parents and educators—we're a team"

How Parents Participate

Parents will assume different roles as they become involved in their child's education. You are doing many of these activities already. This involvement is an ongoing process and these different roles overlap.

Parents as Home Teachers

The most natural role parents play is that of the home teacher. Parents teach children how to do daily tasks, feeding, clothing, etc.

Parents as home teachers help the education process by:

- providing a comfortable, safe environment, consistent feedback and support for healthy, emotional development;
- serving as a model for and guiding appropriate behavior;
- making the most of the natural environment by listening and talking to the child in a manner that reinforces skills taught in school.

Parents as Information Specialists

As part of the team, parents act as information specialists. An information specialist observes carefully and gathers knowledge about the child's development and needs. As information specialists, parents continually ask questions and share answers with professionals concerning:

- the rights of parents and children;
- what services can be expected from schools and professionals, and how they evaluate and treat children;
- their child's development, potential problems, successes and needs.

Parents as Case Managers

Parents also act as case managers. After gathering important information the case manager is well prepared to participate in the process by:

- participating in meetings to develop the special education and learning goals of the child;
- making informed decisions regarding assessment, goals, and placement;
- coordinating all the information received into a case file.

Parents As Advocates

A fourth role parents play is that of child advocate. A child advocate understands the law and school policy and stays in touch with key people to make sure agreements are carried out. A child advocate helps by:

- knowing the child's needs to be sure they are being served;
- taking part in policy making meetings (school board or PTA meetings), and advisory committees;
- talking to friends, neighbors, community workers, and other parents.

These are the roles that have been discussed: Information Specialist, Home Teacher, Case Manager, Child Advocate.

- As an Information Specialist, the parent asks questions to gather and share important knowledge about the child, the services and educational rights and responsibilities.
- As a Home Teacher, the parent serves as a model for appropriate behavior, and provides a healthy, supportive environment.
- As a Case Manager, the parent participates in the educational process by making informed decisions, participating in meetings, and coordinating all information.
- As a Child Advocate, the parent assures that the child's needs are met.

PARENTAL ROLES IN EDUCATION

Home Teacher

Serves as a model for appropriate behavior and provides a healthy, supportive environment.

Child Advocate

Assures that child's needs are met.

Case Manager

Participates in the educational process by making informed decisions, participating in meetings, and coordinating all information.

Information Specialist

Asks questions to gather and share knowledge about the child, the services, and educational rights and responsibilities.

II. The Special Education Process

In Maryland, the special education process takes place under the supervision of an Admission, Review and Dismissal (ARD) Committee. Typically this committee is responsible for ensuring that:

EVALUATION	a child receives an appropriate evaluation to determine his or her eligibility and need for special education services;
IEP DEVELOPMENT	an individualized education program (IEP) is developed to meet the child's needs;
PLACEMENT	the child is placed in an appropriate special education program in the least restrictive environment;
THE INSTRUCTIONAL PROGRAM	the child's instructional program includes the special education and related services described in the IEP; and,
IEP REVIEW AND REEVALUATION	the child's progress in meeting the goals and objectives in the IEP is reviewed annually and that a full and individual reevaluation of the child takes place at least once every three years after the initial assessment.

You will always receive prior notice and be invited to attend any ARD meeting that is held to discuss your child's educational program or handicapping condition.

Evaluation

What Parents Should Know About Evaluation

An evaluation or assessment is a careful look at the educational needs of your child. Since all learning takes place in steps, it is very important for parents to know which "step" must come next for their child. Evaluations provide this information and must take place before the IEP is written.

An evaluation will include several different types of information, provided by different people.

Information provided by teachers:
- educational achievement tests
- informal testing and classroom observations

Information provided by parents:
- reports of what the child can and cannot do at home
- reports on the child's behavior in the home
- relevant family history

Information provided by specialists:
- physical examinations
- physical/occupational therapy evaluations
- vision and hearing evaluations
- speech and language evaluations
- psychological examinations

"Each has a special viewpoint of the child. No *one* knows it all."

One Test Or Procedure Alone Is Not Enough

According to the federal and state laws, evaluation must:

1) be preceded by parent's permission;
2) be made by more than one person—a team or group is required;
3) describe the child's educational needs rather than just provide a test score or label;
4) be fair and not discriminate racially or culturally;
5) be in the child's native language or method of communication (for example, sign language);
6) be redone at least once every three years.

Evaluation is not done just once but must be done regularly as the child grows and changes. Parents or teachers may request an evaluation at any time they feel that more current information is necessary.

"Beginning to understand the child's learning needs"

The Individualized Education Program

What Parents Should Know About the IEP

The IEP describes the services needed for your child's daily educational program to be successful. The IEP is developed by parents, educators and other professionals.

Parents, educators and other professionals together write a program for the child, called the individualized education program or IEP. The IEP explains:

- what kind of school the child will attend;
- what kind of classroom and teacher(s) the child will have;
- what the child can and cannot do now;
- what the child will be learning in the coming months;
- how the child's learning will be evaluated;
- what help the child will receive from specialists such as nurses or speech therapists.

The IEP is a match of the child's needs with the child's daily program. We have a good match when:

- we know what the child can and cannot do (assessment);
- we know what the child needs to learn next (goals);
- we place the child in a classroom that provides what he or she needs in a way that the child can learn;
- we evaluate the child's progress and adjust the IEP as necessary.

There is one IEP for each child and it is to be reviewed and revised at least once a year.

The purpose of the IEP is to look at what the child needs, to decide how those needs are to be met, and to evaluate how well the needs have been met.

"Each child has his own IEP"

Who Develops the IEP?

The IEP is developed not by one person but by several persons at a meeting. The parents have the right to understand what takes place at the meeting and to participate.

According to the law, the meeting must be attended by:

- the child's teacher(s);
- a person designated by the ARD Committee;
- for the first IEP, someone directly involved with the child's assessment (or their representative);
- the child's parent(s).

The parents or the school may request others to attend, such as a school psychologist or speech therapist. Parents may invite others to this meeting if they wish. Others might include:

- another parent who is experienced with IEPs and will be helpful to the parent;
- a legal advisor if parents are initiating a hearing or want legal advice;
- a specialist providing help to the child at the home or school.

The IEP is reviewed and approved by the ARD Committee.

"Parents are key members of meetings to develop their child's IEP."

What Does the IEP Contain?

The IEP includes:

- a description of the child's present abilities and needs (based on assessment);
- a list of annual goals that tell what the child should be able to do at the end of the year. These goals must:
  - be reviewed by parents and be understandable
  - match the child's needs and abilities
  - include specific steps called short term objectives to reach the goals;
- a description of the services the child will receive; examples of these special education services are:
  - special education classroom instruction
  - speech therapy
  - vocational training
  - physical education
  - counseling
- a description of the child's placement and the extent to which the child might participate in the regular classroom with non-handicapped peers;
- dates indicating:
  - when the child will enter the program
  - when the IEP will be reviewed to see if it is working out for the child
  - when the IEP should be revised;
- a description of how the child's progress will be evaluated (how the short term objectives will be evaluated).

(See Appendix C, A Sample IEP)

Placement

What Parents Should Know About Placement

Placement means the level of service your child will receive, in accordance with his IEP, and includes the school or center, the type of classroom and teacher, and amount of time the child will spend with non-handicapped students.

Parents are invited to be a part of the school's team that is responsible for making decisions about the educational program and placement for their child.

Because each child is unique, the school system must find the appropriate ways to meet each child's needs. School systems have different types of schools and classes to fit the educational needs of their handicapped students.

A variety of options should be explored before a placement decision is made. The ARD Committee will want to choose the placement that can help the child reach the goals on the IEP.

Parents should become familiar with the alternatives for their child. Parents can often visit other schools and classes to learn of alternative approaches.

In Maryland, the continuum of alternative placements are identified by Levels I through VI as well as home and hospital instruction.

LEVEL I
regular education program with supplementary services provided to the regular teacher in the form of consultation and/or special materials and equipment

LEVEL II
regular classroom for the child with direct and indirect special education services up to an average of 1 hour per school day

LEVEL III
regular classroom with direct and indirect special education services up to an average of 3 hours per day

LEVEL IV
direct and indirect special education services up to 6 hours per day provided in a special class within a general education facility

LEVEL V
services for the entire school day provided in a special wing or day school

LEVEL VI
24-hour special education services and personal care provided in a residential setting

Home and Hospital Instruction
short-term itinerant instructional services to students in convalescence or emotional crisis

The appropriate level of service for a handicapped child is the setting that provides the student as much contact as possible with non-handicapped children while meeting all of his learning needs and physical requirements as described in his IEP.

This is considered to be the *least restrictive environment for that child.*

"Handicapped children learn with non-handicapped children."

Why is least restrictive environment important?

- It is important for handicapped children to be educated in the *least restrictive environment* because they are more like non-handicapped children than they are different from them.
- It is important for the development of a child's personality and positive self-image to play and talk with non-handicapped children.
- It is important for people who do not have handicaps to become aware of and accept those with handicapping conditions.
- It is good for a child to be in a class that is as much like a regular classroom as possible so that he or she can learn from and follow the examples set by non-handicapped children.

It is not always in the child's best interest to go to school with children who are not handicapped. The child's education is planned around his or her special needs. Placement in a class where those needs can best be met is the most important consideration. This may be in a special class.

One of the goals for a child who is best served in a separate school or special class may be to acquire the necessary behaviors that would enable him or her to move into a less restrictive environment in the future.

To make a good placement decision parents will need to ask these questions:

1. Will the placement meet all of my child's learning needs?
2. Will the placement give my child appropriate contact with students who are not handicapped?
3. Will the placement be as close as possible to home?

The Instructional Program

What Parents Should Know About the Instructional Program

The instructional program should include a mix of regular education, special education and related services, as described in the IEP, to meet the child's needs.

"Special education" means instruction provided at no cost to the parents which is specially designed to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction and instruction in hospitals and institutions. The term also includes vocational education if it consists of specially designed instruction to meet the unique needs of a handicapped child at no cost to the parents. "Related services" are transportation and those developmental, corrective, and other supportive services that are required to assist a handicapped child in benefitting from education. These services include speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training. (COMAR 13A.05.01.02B.)

"I'm prepared because my child deserves the best."

To make the most of their child's instructional program, parents may wish to:

- Visit the school/center from time to time to talk with the teacher and share insights, questions, problems, and progress.
- Request that the teacher suggest activities for reinforcing at home what the child is learning at school.
- Join a local parent group to explore their resources.

  Often parents find that meeting other parents who have shared many of the same experiences is most helpful. Discussions on topics of interest, visits to educational programs, talks by professionals, and new friendships are available in most parent groups (see Appendix B for parent organizations).

  Parents who find no parent group which fits their needs may wish to consider starting one.
- Prepare for each meeting and parent-teacher conference by:

  bringing the child's home file to the meeting;

  listing questions for discussion and deciding what information should be obtained by the end of the discussion;

  talking with the child and reviewing his or her feelings and thoughts about school;

  writing down information about the child's new skills, interests, needs, and changes.

IEP Review and Reevaluation

- Each child's progress in meeting the goals and objectives of the IEP is reviewed by the ARD Committee 60 days after initial placement and then at least annually. At these times, based on the child's progress, new annual goals and short term instructional objectives are developed for the IEP.
- Participants at these IEP review meetings include:
  - person(s) designated by the ARD Committee
  - the child's parent(s)
  - the child, when appropriate
  - others as appropriate
- The IEP is signed by the parents and approved by the ARD Committee.
- At least once every three years, each child receives a full and individual evaluation as described earlier. Parents receive prior notice of the evaluation and must sign their informed consent before the evaluation.
- Parents or school personnel may request at any time that the ARD Committee arrange for assessments.

APPENDIX A
PARENTS' EDUCATIONAL DICTIONARY

EDUCATIONAL DICTIONARY

Key Words	What they mean for Special Education in Maryland
annual goals	Statements which describe the new skills to be learned by the child in the next year. These must be related to the child's assessment results and be discussed by the IEP team members (including the parent).
ARD Committee	Admission, Review, and Dismissal Committee (required by Maryland, not federal law) maintained by the local education agency (LEA). "Each local education agency shall maintain an Admission, Review, and Dismissal Committee or committees, which serves with the authority of the local superintendent of schools, and is composed of the following: (a) A chairperson designated by the local superintendent; (b) Individuals who are familiar with the child's current level of functioning (these individuals shall include a special educator and interdisciplinary personnel from the local education agency and the local health department), and other public agencies, as appropriate; (c) Others as deemed appropriate, such as individuals expected to become deliverers of direct service to the student." (COMAR 13A.05.01.06C)
assessment/evaluation	Extensive procedure given to all children who have been identified through screening as potentially in need of special education programs. It shall consist of (a) an assessment of reading, math, spelling, written and oral language, and perceptual motor functioning, as appropriate and (b) an assessment of cognitive, emotional, and physical factors, as appropriate.
child find/identification	Federal law requires that all local school systems locate and evaluate all children, from birth through age 21, who may be suspected of having a learning difficulty or physical or emotional problem which will affect the child's school program.
cognition	Sequence of child development described as knowing, including awareness, remembering, and thinking.
communication	Sequence of normal child development described as talking, listening, and understanding.
deaf	A hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, and which adversely affects educational performance.

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Key Words	What they mean for Special Education in Maryland
deaf-blind	Hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that the child cannot be accommodated in special education programs solely for deaf or blind children.
FAPE	Free Appropriate Public Education – the federal phrase which describes the education to which handicapped children are entitled. Appropriate special education programs are those services defined in each child's individualized education program.
fine motor	Sequence of normal child development described as small muscle use (for example, eating, using fingers).
gross motor	Sequence of normal child development described as large muscle use (for example, sitting, crawling, walking).
handicapped children	Children who have been determined through appropriate assessment as having temporary or long-term special educational needs arising from cognitive, emotional, or physical factors, or any combination of these. Their ability to meet general educational objectives is impaired to a degree that the services available in the general education program are inadequate in preparing them to achieve their educational potential.
hard of hearing	A hearing impairment, whether permanent or fluctuating, which adversely affects a child's educational performance but is not included under the definition of "deaf" in this section.
individualized education program (IEP)	A written statement for a handicapped child describing annual goals, short-term instructional objectives, and the special education and related services for the child. It must be based on the results of the evaluation and must be developed at a meeting of parents, teachers, supervisors, and child, where appropriate.
least restrictive environment (LRE)	Placement or setting that provides the student with as much contact as possible with children who are not handicapped, while meeting all of the child's learning needs and physical requirements.
levels of service	Continuum of alternative placements for handicapped children in Maryland.

EDUCATIONAL DICTIONARY

Key Words	What they mean for Special Education in Maryland
mentally retarded	Significantly sub-average general intellectual functioning with deficits in adaptive behavior which adversely affects a child's educational performance. These deficits show up during early childhood.
multidisciplinary team	A group of people who work together for a common goal, each person representing a different area of expertise. For example, a teacher, a speech therapist, an opthalmologist, and a psychologist.
multi-handicapped	Multiple impairments (such as mentally retarded-blind, mentally retarded-orthopedically impaired, etc.), the combination of which causes such severe educational problems that the children possessing them cannot be accommodated in special education programs designed solely for children with one of the impairments. The term does not include deaf-blind children.
observation	A careful look at a child in school or home to note how he or she works and plays in different situations and at different activities. The purpose of observation is to learn more about the child than can be obtained from a test.
occupational therapist	A person trained to develop the skills a handicapped child needs in daily living, such as feeding, dressing and play.
orthopedically impaired	A severe orthopedic impairment which adversely affects a child's educational performance. The term includes impairments caused by birth, disease, or other causes.
other health impaired	Various impairments which adversely affect a child's educational performance. The term includes autism and limited strength, vitality or alertness due to chronic or acute health problems (such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes).
parental consent	Permission given voluntarily after provision of information and explanation about the activity for which the school seeks parental permission. Parental consent may be revoked (taken back by the parent) at any time.

EDUCATIONAL DICTIONARY

Key Words	What they mean for Special Education in Maryland
physical therapist	A person trained and licensed to develop strength, endurance, and normal movement patterns so a child may become as independent as possible.
placement	The setting where a child will be educated. This includes the school or center, the classroom and teacher, and amount of time the child will spend with non-handicapped students.
related services	Transportation and those developmental, corrective, and other supportive services that are required to assist a handicapped child in benefiting from education. The term "related services" includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes school health services, social work services in schools, and parent counseling and training.
screening	Initial procedures for identifying children who may have problems which impede learning. Screening is provided to all kindergarten children and to those children who later may be showing evidence of educational difficulties. Screenings shall include, but are not limited to, developmental information, previous assessments, visual, auditory and motor functioning, and expressive and receptive language ability. Screenings are done in the child's primary language.
self-help	Sequence of normal child development described as care of self (for example, feeding, toileting, dressing).
seriously emotionally disturbed	A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance: (1) an inability to learn which cannot be explained by intellectual, sensory, or health factors; (2) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (3) inappro-

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Key Words	What they mean for Special Education in Maryland
	priate types of behavior or feelings under normal circumstances; (4) a general pervasive mood of unhappiness or depression; and (5) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes children who are schizophrenic. The term does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed.
short-term objectives	As used in PL 94-142, IEP objectives that are measurable, intermediate steps between a handicapped child's present level of educational performance and the annual goals established for the child.
social/emotional development	The development of relationships, self awareness and response to other people.
special education	Instruction provided at no cost to the parents that is specially designed to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions. The term also includes vocational education consisting of specially designed instruction to meet the unique needs of a handicapped child and provided at no cost to the parents. Related services are transportation and those developmental, corrective, and other supportive services that are required to assist a handicapped child in benefitting from education. The term "related services" includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities, counseling services, and medical diagnosis and evaluation. The term also includes school health services, social work services in schools, and parent counseling and training.
special education teacher	A person trained and certified to provide specially designed instruction to meet the individual needs of a handicapped child.
specific learning disability	A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term

EDUCATIONAL DICTIONARY

Key Words	What they mean for Special Education in Maryland
	includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not apply to children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.
speech impaired	A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child's educational performance.
visually handicapped	A visual impairment which, even with correction, adversely affects a child's educational performance. The term includes both partially seeing and blind children.

APPENDIX B
PARENTS' GUIDE TO RESOURCES

STATE EDUCATION AGENCY RESOURCES

1. Maryland State Department of Education
   Division of Special Education
   200 West Baltimore Street
   Baltimore, Maryland 21201
   Mrs. Martha Irvin, Assistant State Superintendent

   For information call:

   Marjorie Shulbank, Information Specialist

   659-2478 (if within Baltimore - Metropolitan Area)

   383-6523 (call collect if outside Baltimore - Metropolitan Area; also has amplification device for hearing impaired)

   659-2666 (TTY calls only)

2. Maryland State Department of Education
   Division of Vocational Rehabilitation
   200 West Baltimore Street
   Baltimore, Maryland 21201
   Mr. Richard Batterton, Assistant State Superintendent

   For information on the Division of Vocational Rehabilitation office in your local subdivision call:

   659-2244

MARYLAND ORGANIZATIONS FOR THE HANDICAPPED

Hearing Problems

1. Maryland School for the Deaf
   101 Clarke Place
   Frederick, Maryland 21701
   662-4159 (Voice and TTY)

   Maryland School for the Deaf - Columbia Campus
   Route 175 & Old Montgomery Road
   Box 894
   Columbia, Maryland 21044
   465-9611 (Voice and TTY)

2. Maryland Association for the Deaf
   International Association for Parents of the Deaf
   814 Thayer Avenue
   Silver Spring, Maryland 20910
   585-5400

3. Hearing & Speech Agency
   2220 St. Paul Street
   Baltimore, Maryland 21218
   243-3800 (Voice)
   243-2672 (TTY)

4. Alexander Graham Bell Association for the Deaf
   3417 Volta Place, N.W.
   Washington, DC 20007
   (202) 337-5220

5. Gallaudet College
   7th Street and Florida Avenue, N.W.
   Washington, DC 20002
   (202) 447-0505

Blind and Visually Impaired

1. Maryland School for the Blind
   3501 Taylor Avenue
   Baltimore, Maryland 21236
   444-5000

2. Maryland State Library for the Blind and Visually Handicapped
   1715 North Charles Street
   Baltimore, Maryland 21201
   [illegible]-2668

   [illegible]ind Industries and Services in Maryland
   2901 Strickland Street
   Baltimore, Maryland 21223
   233-4567

Mentally Retarded

1. Maryland Association for Retarded Citizens
   5602 Baltimore National Pike
   Suite 200
   Baltimore, Maryland 21228
   744-0255
   (each county has a local chapter)

2. Maryland State Mental Retardation Developmental Disabilities Administration
   201 West Preston Street
   Baltimore, Maryland 21201
   383-3354

Learning Disabilities

1. Maryland Association for Children with Learning Disabilities
   320 Maryland National Bank Building
   Baltimore, Maryland 21202
   (many affiliate chapters - write for further information)

2. Association for Learning Disabled Adults
   P.O. Box 9722
   Friendship Station
   Washington, DC 20016

Other Organizations Serving the Handicapped

1. Maryland State Society for Autistic Children
   12908 Ruxton Road
   Silver Spring, Maryland 20904
   384-9347

2. Baltimore County Coalition for Handicapped Children
   County Court Building
   400 Washington Avenue
   Towson, Maryland 21204
   494-3318

3. Baltimore County Parents and Friends of the Retarded
   758 Fairmount Avenue
   Suite 2
   Towson, Maryland 21204

4. Cystic Fibrosis Foundation
   8641 Loch Raven Boulevard, 2-D
   Baltimore, Maryland 21204

5. Spina Bifida Association
   30 Theo Lane
   Towson, Maryland 21204
   Attn: Ms. Linda Dillon

6. Maryland Society for Crippled Children and Adults
   3700 Fourth Street
   Baltimore, Maryland 21205

7. Parents for Preschool Education for the Handicapped
   c/o Ms. Susan Fisher
   6507 Marlboro Pike
   District Heights, Maryland 20028

8. Prince George's County Coalition for Support of Handicapped Children
   4009 College Heights Drive
   University Parkway, Maryland 20782

9. Parent Action Council/Children with Special Learning Disabilities
   3405 Chatham Road
   Adelphi, Maryland 20783
   Attn: Betty Bowers

10. Maryland Association for Placement of Handicapped Children
    208 South Hammonds Ferry Road
    Linthicum, Maryland 21090

Organizations Dealing with Physically Handicapped Individuals

1. National Association of the Physically Handicapped
   76 Elm Street
   London, Ohio 43140
   (614) 852-1664

   Provides services and information for the physically handicapped.

2. Muscular Dystrophy Association
   810 Seventh Avenue
   New York, New York 10019
   (212) 586-0808

3. United Cerebral Palsy Association
   66 East 34th Street
   New York, New York 10016
   (212) 481-6300

Organizations Dealing with Speech and Hearing Problems

1. National Association of Hearing and Speech Agencies
   814 Thayer Avenue
   Silver Spring, Maryland 20910
   Publishes information and journals on speech and hearing handicaps.
2. Alexander Graham Bell Association for the Deaf
   3417 Volta Place, N.W.
   Washington, DC 20007
   Provides information and referrals for deaf persons.
3. Junior National Association of the Deaf
   Gallaudet College
   7th and Florida Avenue, N.E.
   Washington, DC 20002
   For youths ages 14-21. Provides information, services, etc.
4. American Speech-Hearing Association
   10801 Rockville Pike
   Rockville, Maryland 20852

NATIONAL ORGANIZATIONS FOR THE HANDICAPPED

Organizations Serving All Handicapping Conditions (General)

1. American Coalition of Citizens with Disabilities
   1200 15th Street, N.W.
   Washington, DC 20005
   (202) 785-4265
2. Closer Look
   National Information Center for the Handicapped
   P.O. Box 1492
   Washington, DC 20013
3. Council for Exceptional Children
   1920 Association Drive
   Reston, Virginia 22091
   Provides information on handicaps.
4. American Physical Therapy Association
   1156 15th Street, N.W., Suite 500
   Washington, DC 20005
   (202) 466-2070
   Primarily serves persons with neuromuscular, orthopedic, visual and similar disabilities. Involved in the provision of physical therapy services within schools.
5. American Occupational Therapy Association
   1383 Piccard Drive
   Rockville, Maryland 20850
   (301) 948-9626

6. B'Nai B'Rith Career and Counseling Services
   1640 Rhode Island Avenue, N.W.
   Washington, DC 20036
   Publishes and sells materials on career guidance and counseling.

7. Mainstream, Inc.
   1200 15th Street, N.W.
   Washington, DC 20005
   Assists in the mainstreaming of disabled persons in education, employment and other areas.

8. President's Committee on Employment of the Handicapped
   Washington, DC 20201
   Provides information on employment of handicapped persons.

Organizations Dealing with the Visually Impaired

1. American Foundation for the Blind, Inc.
   15 West 16th Street
   New York, New York 10011
   (212) 924-0420
   Provides a wide variety of services for the blind.

2. American Printing House for the Blind
   1839 Frankfort Avenue
   305 East 24th Street, 17-C
   New York, New York 10010
   (212) 889-3141

3. American Council for the Blind
   1211 Connecticut Avenue, N.W. #506
   Washington, DC 20036
   (202) 833-1251
   Provides information and referrals for the blind.

4. National Association for Parents of the Deaf/Blind
   525 Opus Avenue
   Capital Heights, Maryland 20027

5. National Federation of the Blind
   524 4th Street
   Des Moines, Iowa 50309
   Main goal is to integrate blind persons into society.

6. National Association for Visually Handicapped
   305 East 24th Street, 17-C
   New York, New York 10010
   (212) 889-3141
   Provides information and services for partially sighted children and adults.

7. National Society for the Prevention of Blindness, Inc.
   79 Madison Avenue
   New York, New York 10016
   (212) 684-3505

   Provides information on blindness plus vocational opportunities.

8. Recording for the Blind
   215 East 58th Street
   New York, New York 10022

   Loans recorded books to visually impaired children and adults. Also, loans to learning disability persons.

9. Hellen Keller National Center for Deaf/Blind Youths and Adults
   111 Middle Neck Road
   Sands Point, New York 11050

   Provides information and direct services to persons with substantial hearing and vision loss.

10. National Braille Association
    85 Godwin Avenue
    Midland, New Jersey 07432
    (201) 447-1484

    Provides direct services to braille readers.

11. Volunteer Services for the Blind
    919 Walnut Street
    Philadelphia, Pennsylvania 19107
    (215) 627-0600

    Furnishes blind, deaf-blind and the partially sighted with braille, large type and sound-recorded materials.

Organization Dealing with Autism

National Society for Autistic Children
1234 Massachusetts Avenue, N.W.
Suite 1017
Washington, DC 20005
(202) 783-0125

Organizations Dealing with Mentally Handicapped

1. National Association for Retarded Citizens
   2501 Avenue J
   Arlington, Texas 76011
   (817) 640-0204

2. American Association on Mental Deficiency
   5201 Connecticut Avenue, N.W.
   Washington, DC 20015
   (202) 685-5400

3. John F. Kennedy Foundation
   1701 K Street, N.W.
   Suite 205
   Washington, DC 20006
   (202) 331-1731

4. Down's Syndrome Congress
   1640 West Roosevelt Road
   Room 156 E.
   Chicago, Illinois 60608
   (312) 226-0416

Other Organizations Dealing with Handicapped Individuals

1. National Kidney Foundation
   116 East 27th Street
   New York, New York 10016

2. National Multiple Sclerosis Society
   205 East 42nd Street
   New York, New York 10017
   (212) 986-3240

3. Epilepsy Foundation of America
   1828 "L" Street, N.W.
   Washington, D.C. 20036

4. United Epilepsy Association
   111 West 57th Street
   New York, New York 10019

5. National Epilepsy League
   203 North Wabash Avenue
   Chicago, Illinois 60601

6. American Association of Epilepsy
   1729 F Street, N.W.
   Washington, DC 20006

7. Leukemia Society, Inc.
   211 East 43rd Street
   New York, New York 10017

8. American Diabetic Association
   811 Street, Margaret's Road
   Chillicothe, Ohio 45601

9. National Hemophelia Foundation
   19 West 34th Street
   New York, New York 10001

10. Spina Bifida Association
    343 S. Dearborn Street
    Room 317
    Chicago, Illinois 60604
    (312) 663-1562

11. National Tay-Sachs and Allied Diseases Association
    122 East 42nd Street
    New York, New York 10168
    (212) 661-2780

12. The Mucopolysaccharidoses Society
    552 Central Avenue
    Bethpage, New York 11714
    (516) 433-4410

Organizations Dealing with Learning Disabilities

1. Association for Children with Learning Disabilities
   5225 Grace Street
   Pittsburgh, Pennsylvania 15236
   (412) 881-1191

2. Orton Society
   8415 Bellona Lane
   Towson, Maryland 21204
   (301) 296-0232

   Devoted to the study, treatment and preventions of the problems of dyslexia.

Organizations Dealing with Travel, Sports and Recreation

1. American Alliance for Health, Physical Education, and Recreation
   Physical Education and Recreation for Handicapped
   Information and Research Utilization Center
   1201 16th Street, N.W.
   Washington, DC 20036
   (202) 833-5541

2. American Camping Association
   Bradford Woods
   Martinsville, Indiana 46151
   (317) 342-8456

3. Boy Scouts of America
   Scouting for the Handicapped Division
   U.S. Routes 1 & 130
   N. Brunswick, New Jersey 08902
   (201) 249-6000

4. National Wheelchair Athletic Association
   40-42 62nd Street
   Woodside, New York 11377
   (212) 424-2929

5. Special Olympics
   1701 K Street, N.W.
   Suite 203
   Washington, DC 20006
   (202) 331-1346

6. Travel Information Center
   Moss Rehabilitation Hospital
   12th Street and Tabor Road
   Philadelphia, Pennsylvania 19141

Note: The Maryland State Department of Education, Division of Special Education maintains information on a variety of handicapping conditions and syndromes. If you do not find the information you are seeking on these pages, please call the Information Specialist listed on the first page of this Appendix.

ADVOCACY GROUPS

PROVIDING FREE OR LOW COST LEGAL SERVICES

MAUDD
(Maryland Advocacy Unit for the Developmentally Disabled)
2510 St. Paul Street
Baltimore, Maryland 21218
383-3400 (voice and TTY)

Children's Defense Fund
1520 New Hampshire Avenue, N.W.
Washington, DC 20036
(202) 483-1470

General Practice Clinic
University of Maryland Law School
500 West Baltimore Street
Baltimore, Maryland 21201
528-3295

American Civil Liberties Union
744 Dulaney Valley Court
Baltimore, Maryland 21204
337-9233

National Center for Law and the Deaf
Gallaudet College
7th and Florida Avenue, N.E.
Washington, DC 20002
651-5457

Legal Aid Bureau
714 East Pratt Street
Baltimore, Maryland 21202
539-5340

APPENDIX C
A SAMPLE IEP

A SAMPLE IEP

Each public school system in Maryland uses a different format for its individualized education programs (IEPs). The minimum requirements for an IEP are contained in federal and state regulations.

The following IEP is a sample.

INDIVIDUALIZED EDUCATION PROGRAM

Student's Name _____ School _____
Last First Middle

Birth Date _____ Soundex Number _____ Federal Census Code _____ Grade _____

Assessment Results: Current levels of Educational Performance based on ___ Assessment Data, and or ___ Annual IEP Rev. Data

_____

_____

_____

_____

Annual Goals: _____

_____

_____

_____

_____

Special Education, Related Services, and Regular Education Participation Needed to Achieve Annual Goals			To Be Provided				Projected Starting Date	Projected Ending Date
Type of Service	Level	Hrs/wk	Type of Service	Level	Hrs/wk	Goal		
_____	____	_____	_____	____	_____	____	_____	_____
_____	____	_____	_____	____	_____	____	_____	_____
_____	____	_____	_____	____	_____	____	_____	_____
Hrs/wk - Regular Education		_____	Hrs/wk - Regular Education		_____	____		

_____

Date of ARD Meeting to Develop IEP _____ Review Date (Projected) _____ /Actual _____

_____ /_____

_____ /_____

ARD Committee
Title/Position Signature

_____

_____

_____

_____

_____

My signature indicates that my rights to request a local hearing concerning the special education placement and services described on this IEP, my rights to inspect any records pertaining to my child, and my rights to request an independent assessment have been explained to me, and, furthermore, that I approve the special education placement and services described on this IEP.

Parent _____ Date _____

Parent _____ Date _____

Page _____

Individualized Education Program

Student's Name _____
Last First Middle

Short-term Objectives (Use separate sheet for each goal)	Date of Initiation	Objective Criteria and Evaluation Procedures	Date Completed	Person Responsible	Comments

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